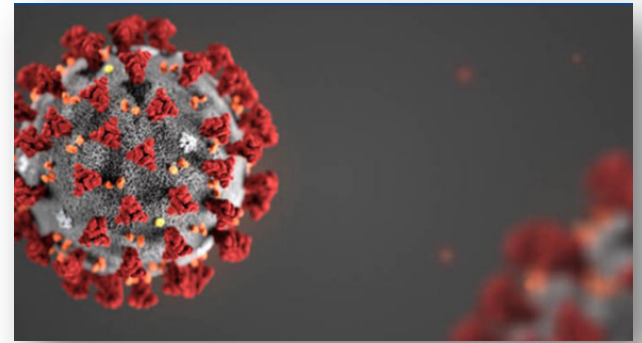




**Department
of Health**



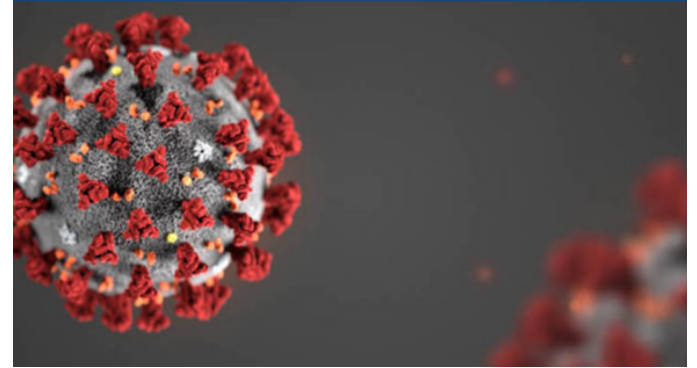
An Update for NYS Healthcare Providers on COVID-19

April 16, 2020

**Elizabeth Dufort, MD, FAAP
Medical Director, Division of Epidemiology
New York State Department of Health**

Agenda

- Global, National, New York State Updates
- PPE
- Testing Updates
- Immunizations
- Healthcare worker back to work guidance
- Community Mitigation
- Infection Prevention and Control
- Convalescent Plasma
- Telehealth
- Healthcare System Surge Response
- Resources
- Pre-planned Q & A: Chat box not feasible with level of attendance



Upcoming Calls

Update: Future weekly calls will be held in April on Thursdays 1-2 PM

- **Recordings will be available immediately:** [NYSDOH COVID-19 Healthcare Provider website](#)
- In addition to YouTube, an on-demand version of our weekly sessions for healthcare providers in NYS is now available as a podcast – search NYSDOH
- If you are not receiving email invitations to the call series, please work with your Health Commerce System (HCS) site coordinator to receive notifications from the Integrated Health Alerting and Notification System (IHANS)



Department
of Health

Disclaimer

- The situation is rapidly evolving, as is our understanding of this new virus.
- All of the information presented is based on our best knowledge as of today.

Situation Summary: COVID-19 Global, 4/15/2020

www.who.int/emergencies/diseases/novel-coronavirus-2019/situation-reports

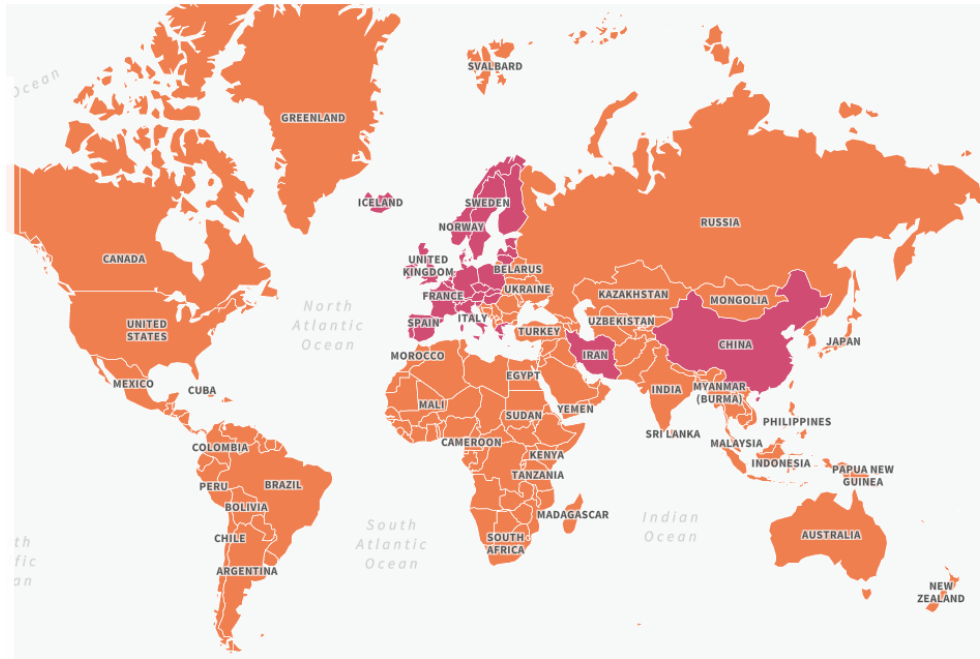
Region	Confirmed Cases	Deaths
Global	1,914,916	123,010
Western Pacific	124,204	4201
European	977,956	84,607
South-East Asia	20,287	936
Eastern Mediterranean	107,389	5395
Africa	11,367	523
Americas	673,361	27,336



Department
of Health

COVID-19 CDC Travel Recommendations by Country

www.cdc.gov/coronavirus/2019-ncov/travelers/index.html



Geographic Risk Assessment for COVID-19 Transmission

Click on the map to get country-specific travel health information about COVID-19.

Country Transmission Level

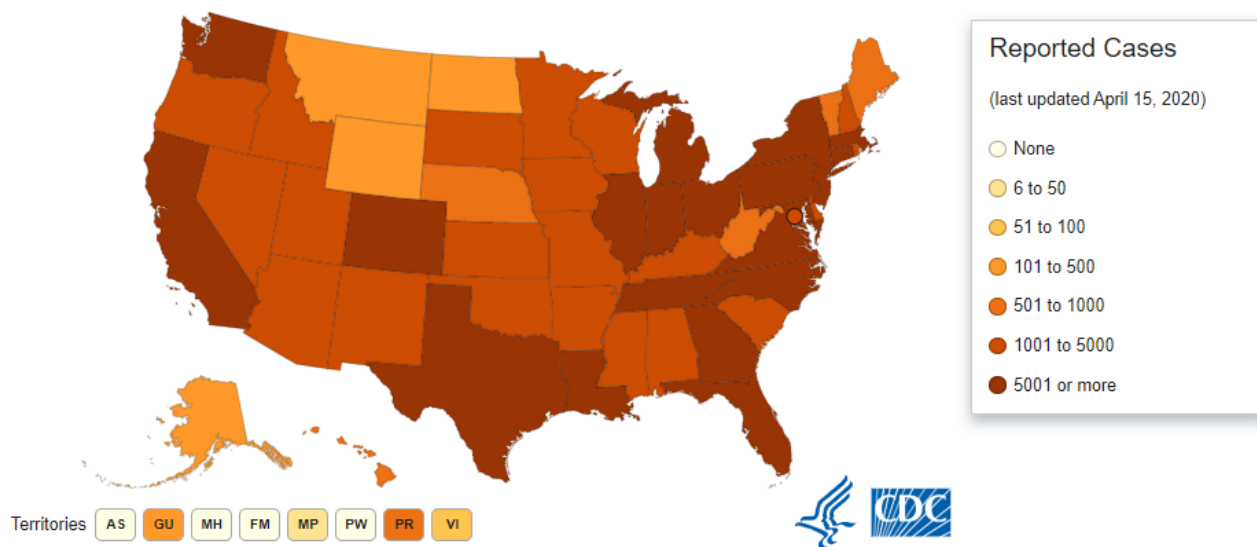
- Widespread ongoing transmission with restrictions on entry to the United States
- Widespread ongoing transmission without restrictions on entry to the United States
- Ongoing community transmission
- Limited community transmission

- Level 3** Widespread transmission with US entry restrictions: China, Iran, Most of Europe, UK and Ireland
- Level 3** Widespread transmission without US entry restrictions: Global Pandemic

Situation Summary: Covid-19 U.S. (April 15, 2020)

www.cdc.gov/coronavirus/2019-ncov/cases-in-us.html

States Reporting Cases of COVID-19 to CDC*



- **Total cases:** 605,390
- **Total deaths:** 24,582
- All 50 states plus, Puerto Rico, Guam, Northern Mariana Islands, US Virgin Islands and Washington DC all reporting cases

Situation Summary: Covid-19 U.S.

www.cdc.gov/coronavirus/2019-ncov/cases-in-us.html

Demographic characteristics of COVID-19 cases in the United States, as of April 14, 2020*

Age group (years)	No. of cases (% of total)					Total
	< 18	18-44	45-64	65+	Unknown	
Totals	7,001	145,499	147,003	90,619	8,730	398,852
Race missing/unspecified	5,958 (85%)	119,683 (82%)	115,997 (79%)	63,449 (70%)	5,687 (65%)	310,774 (78%)
Race specified	1,043 (15%)	25,816 (18%)	31,006 (21%)	27,170 (30%)	3,043 (35%)	88,078 (22%)
Among those with race specified						
American Indian or Alaska Native	2 (0.2%)	128 (0.5%)	106 (0.3%)	54 (0.2%)	3 (0.1%)	293 (0.3%)
Asian	41 (4%)	1,238 (5%)	1,368 (4%)	826 (3%)	217 (7%)	3,690 (4%)
Black or African American	301 (29%)	8,092 (31%)	10,666 (34%)	7,729 (28%)	374 (12%)	27,162 (31%)
Native Hawaiian or other Pacific Islander	4 (0.4%)	131 (0.5%)	114 (0.4%)	57 (0.2%)	10 (0.3%)	316 (0.4%)
White	683 (65%)	16,120 (62%)	18,662 (60%)	18,452 (68%)	2,438 (80%)	56,355 (64%)
Multiple/other	12 (1.2%)	107 (0.4%)	90 (0.3%)	52 (0.2%)	1 (0%)	262 (0.3%)
Missing/unspecified	5,962 (85%)	12,0883 (83%)	11,8912 (81%)	68,857 (76%)	4,191 (48%)	318,805 (80%)
Hispanic/Latino	315 (4%)	5911 (4%)	5108 (3%)	2097 (2%)	572 (7%)	14,003 (4%)
Non-Hispanic/Latino	724 (10%)	18,705 (13%)	22,983 (16%)	19,665 (22%)	3,967 (45%)	66,044 (17%)

*Case notifications were received by CDC from U.S. public health jurisdictions and the National Notifiable Diseases Surveillance System (NNDSS).

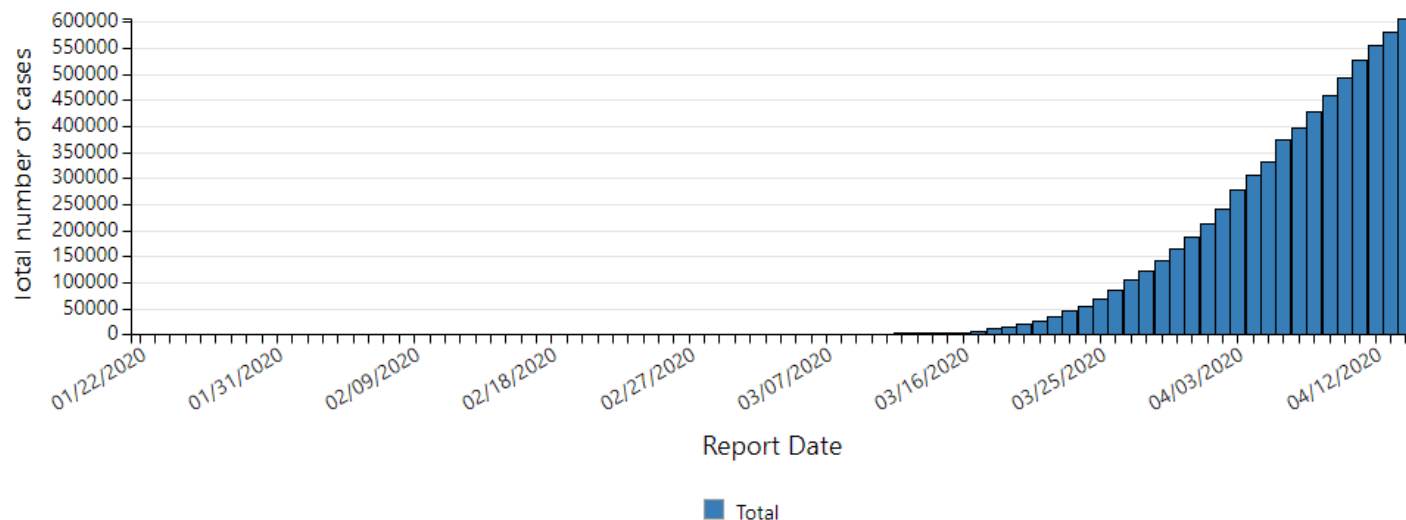


Department
of Health

Situation Summary: Covid-19 U.S.

www.cdc.gov/coronavirus/2019-ncov/cases-in-us.html

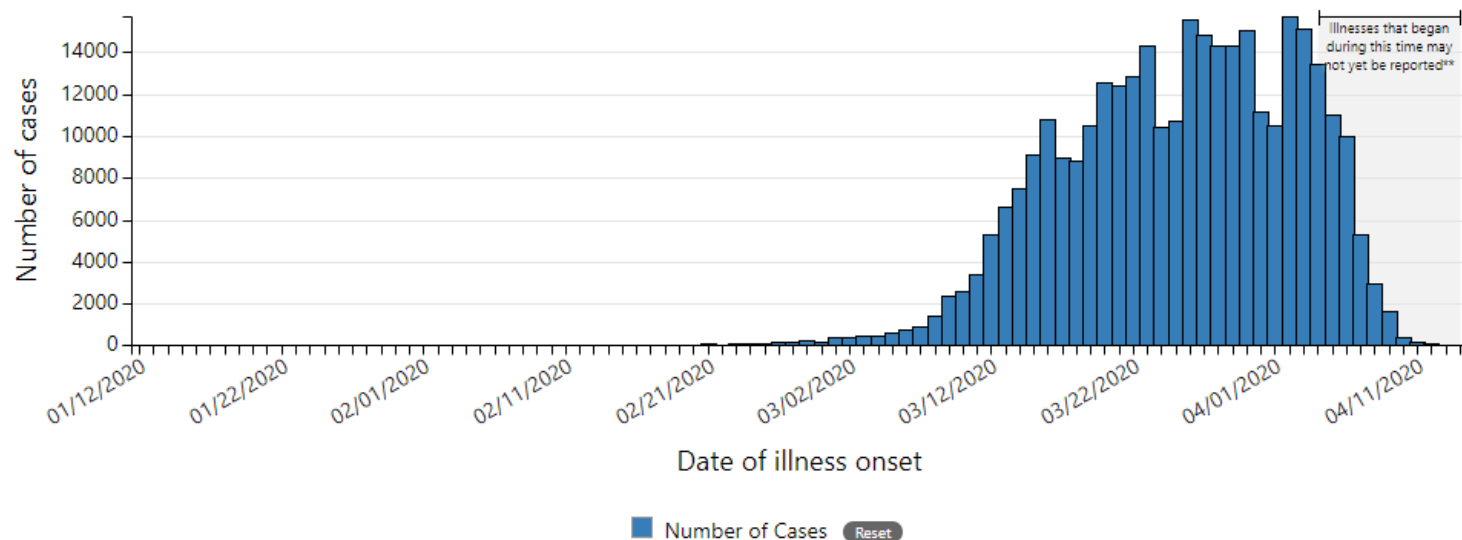
Cumulative total number of COVID-19 cases in the United States by report date, January 12, 2020 to April 14, 2020, at 4pm ET
(n=605,390)*†



Situation Summary: Covid-19 U.S.

www.cdc.gov/coronavirus/2019-ncov/cases-in-us.html

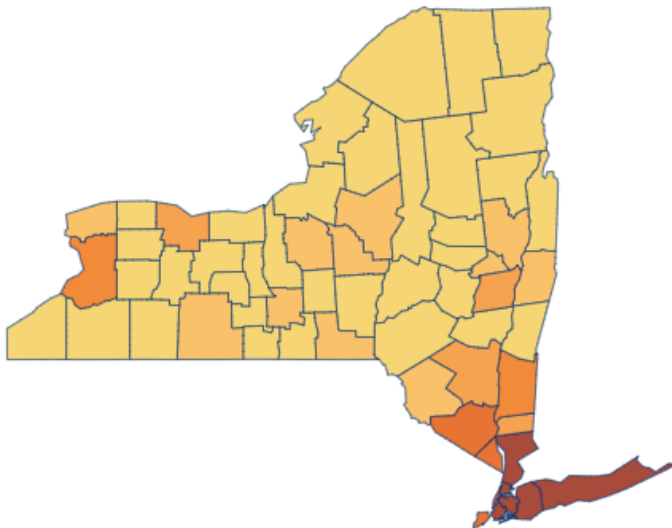
COVID-19 cases in the United States by date of illness onset, January 12, 2020, to April 14, 2020, at 4pm ET (n=325,944)*



NYSDOH COVID-19 Tracker (April 14, 2020)

Found at: [NYSDOH COVID-19 website](#)

Persons Tested Positive by County



- 01-99
- 100-499
- 500-999
- 1,000-4,999
- 5,000-9,999
- 15,000-19,999
- 20,000+

Statewide

Total Persons Tested

526,012

Total Tested 4/14

26,869

Total Tested Positive

213,779

Sex Distribution of Positive Cases

Female	Male	Unknown
46.1%	53.3%	0.6%

New Positives 4/14

11,571

NYSDOH COVID-19 Tracker (April 14, 2020)

Found at: [NYSDOH COVID-19 website](https://www.health.ny.gov/statistics/covid19/)

Daily Totals: Persons Tested and Persons Tested Positive

■ Total Persons Tested ■ Total Tested Positive

Hover over a bar to see details

Time Period

(All)



Click County to See Detail
Click Again for Statewide

Albany	548
Allegany	28
Bronx	24,653
Broome	153
Cattaraugus	32
Cayuga	36
Chautauqua	24
Chemung	69
Chenango	71
Clinton	45
Columbia	96
Cortland	23
Delaware	46
Dutchess	2,048
Erie	1,751
Essex	12
Franklin	13
Fulton	24
Genesee	76
Greene	73
Hamilton	3

[Click for Map View](#)

[Click for Table View](#)

[Click for Fatality Data](#)



Department
of Health

NYSDOH COVID-19 Tracker (April 7, 2020)

Found at: [NYSDOH COVID-19 website](#)

Fatalities by County		Click Here to see nursing home fatalities by county.
County	Place of Fatality	Residence of Individual
Grand Total	11,586	11,586
Albany	26	15
Allegany	0	1
Bronx	1,640	1,771
Broome	6	6
Cayuga	1	2
Chautauqua	1	1
Chemung	2	1
Clinton	3	3

Fatalities by Race/Ethnicity		Click to see NYS excl. NYC age-adjusted rate
<i>Data is preliminary. With 99% reporting, below is the breakdown for NYS excluding NYC. With 63% reporting, below is the breakdown for NYC as provided by NYCDOHMH.</i>		
Race/Ethnicity	NYC	NYS Excl. NYC
Hispanic	34% (29% of population)	14% (12% of population)
Black	28% (22% of population)	17% (9% of population)
White	27% (32% of population)	60% (74% of population)
Asian	7% (14% of population)	4% (4% of population)
Other	4% (3% of population)	5% (1% of population)



Department
of Health

NYSDOH COVID-19 Tracker (April 7, 2020)

Found at: [NYSDOH COVID-19 website](#)

 **Department of Health**

Fatalities by Race/Ethnicity

Testing data as of: 4/14/2020 Midnight
Testing data last updated on: 4/15/2020
(Updated daily before 2 PM)

Age-Adjusted Rate of Fatality COVID-19 Cases per 100,000 by Race/Ethnicity Group 

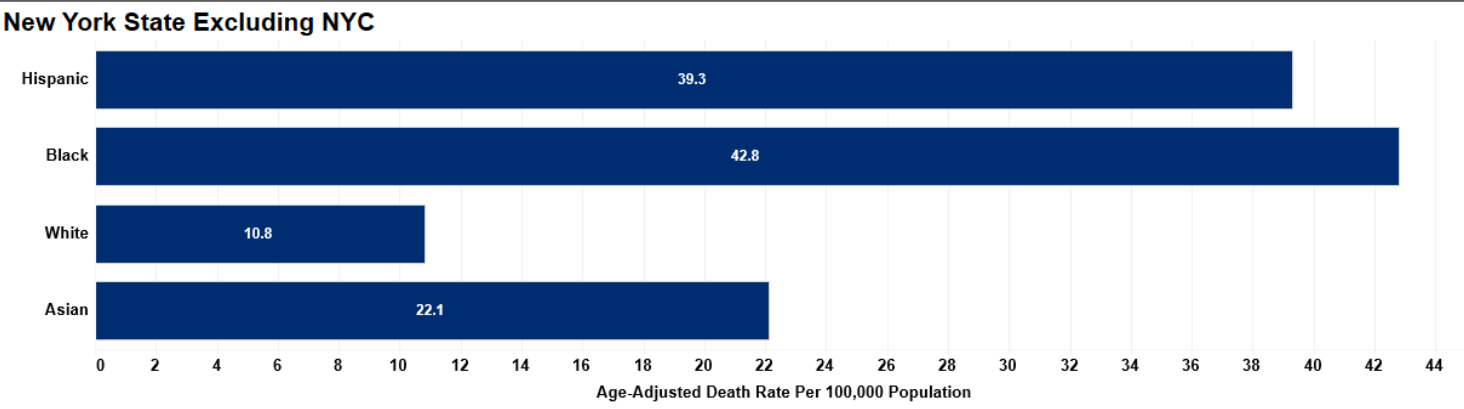
Data is preliminary. With 99% reporting, below is the breakdown for NYS Excl. NYC.

For a complete explanation of age-adjusted rates, click here: <https://www.health.ny.gov/statistics/cancer/registry/age.htm>

Select Region to See Detail

Currently there is insufficient data to allow county specific tables for remaining counties.

- NYS Excl. NYC
- Nassau
- Suffolk
- Dutchess*
- Erie*
- Monroe*
- Orange
- Putnam*
- Rockland
- Westchester



NYSDOH COVID-19 Tracker (April 14, 2020)

Found at: [NYSDOH COVID-19 website](#)

Fatalities by Age Group

Age Group	Fatality Count	%
Grand Total	11,586	100.0%
Unknown	4	0.0%
90 & Over	1,458	12.6%
80 to 89	2,954	25.5%
70 to 79	3,080	26.6%
60 to 69	2,272	19.6%
50 to 59	1,139	9.8%
40 to 49	440	3.8%

Fatalities by Sex

Grand Total	11,586 (100.0%)
Female	4,675 (40.3%)
Male	6,902 (59.6%)
Unknown	9 (0.1%)



Department
of Health

NYSDOH COVID-19 Tracker (April 7, 2020)

Found at: [NYSDOH COVID-19 website](#)

Top 10 Comorbidities by Age Group (10,277 out of 11,586 (88.7%) total fatalities have at least one comorbidity)

Age Range	Hypertension	Diabetes	Hyperlipidemia	Coronary Artery Disease	Dementia	Atrial Fibrillation	COPD	Renal Disease	Cancer	Congestive Heart Failure
Grand Total	6,592	4,351	2,301	1,424	1,261	933	926	1,245	865	774
90 and Over	844	336	262	166	377	212	101	121	120	148
80 to 89	1,826	1,010	644	481	508	362	286	332	273	267
70 to 79	1,918	1,376	722	434	287	230	297	352	254	207
60 to 69	1,281	982	453	252	76	91	179	276	162	107



Department
of Health

NYS COVID-19 Healthcare Utilization

- Total COVID-19 currently
 - Hospitalized: 17,735 (*decreased by 600*)
 - ICU admissions: 5,071 (*decreased by 134*)
 - Intubations: 4,367 (*decreased by 40*)
- Deaths
 - 10,921 total
 - 606 (*reported yesterday, 146 less deaths than the day prior*)

Telehealth Discussions with Your Patients

- **First discussion → TELEHEALTH**
- **TELEHEALTH SLIDES TO FOLLOW**

Personal Protective Equipment (PPE)

PPE

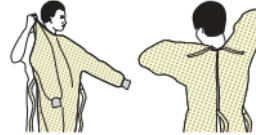
Donning

SEQUENCE FOR PUTTING ON PERSONAL PROTECTIVE EQUIPMENT (PPE)

The type of PPE used will vary based on the level of precautions required, such as standard and contact, droplet or airborne infection isolation precautions. The procedure for putting on and removing PPE should be tailored to the specific type of PPE.

1. GOWN

- Fully cover torso from neck to knees, arms to end of wrists, and wrap around the back
- Fasten in back of neck and waist



2. MASK OR RESPIRATOR

- Secure ties or elastic bands at middle of head and neck
- Fit flexible band to nose bridge
- Fit snug to face and below chin
- Fit-check respirator



3. GOGGLES OR FACE SHIELD

- Place over face and eyes and adjust to fit



4. GLOVES

- Extend to cover wrist of isolation gown



USE SAFE WORK PRACTICES TO PROTECT YOURSELF AND LIMIT THE SPREAD OF CONTAMINATION

- Keep hands away from face
- Limit surfaces touched
- Change gloves when torn or heavily contaminated
- Perform hand hygiene



Department
of Health

PPE

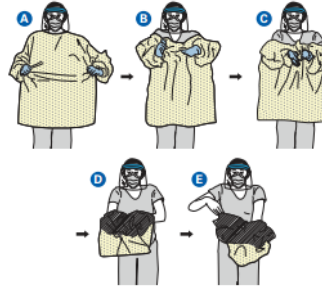
Doffing

HOW TO SAFELY REMOVE PERSONAL PROTECTIVE EQUIPMENT (PPE) EXAMPLE 2

Here is another way to safely remove PPE without contaminating your clothing, skin, or mucous membranes with potentially infectious materials. **Remove all PPE before exiting the patient room** except a respirator, if worn. Remove the respirator **after** leaving the patient room and closing the door. Remove PPE in the following sequence:

1. GOWN AND GLOVES

- Gown front and sleeves and the outside of gloves are contaminated!
- If your hands get contaminated during gown or glove removal, immediately wash your hands or use an alcohol-based hand sanitizer
- Grasp the gown in the front and pull away from your body so that the ties break, touching outside of gown only with gloved hands
- While removing the gown, fold or roll the gown inside-out into a bundle
- As you are removing the gown, peel off your gloves at the same time, only touching the inside of the gloves and gown with your bare hands. Place the gown and gloves into a waste container



2. GOGGLES OR FACE SHIELD

- Outside of goggles or face shield are contaminated!
- If your hands get contaminated during goggle or face shield removal, immediately wash your hands or use an alcohol-based hand sanitizer
- Remove goggles or face shield from the back by lifting head band and without touching the front of the goggles or face shield
- If the item is reusable, place in designated receptacle for reprocessing. Otherwise, discard in a waste container

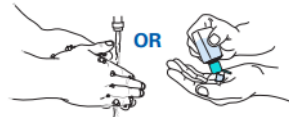


3. MASK OR RESPIRATOR

- Front of mask/respirator is contaminated — DO NOT TOUCH!
- If your hands get contaminated during mask/respirator removal, immediately wash your hands or use an alcohol-based hand sanitizer
- Grasp bottom ties or elastics of the mask/respirator, then the ones at the top, and remove without touching the front
- Discard in a waste container



4. WASH HANDS OR USE AN ALCOHOL-BASED HAND SANITIZER IMMEDIATELY AFTER REMOVING ALL PPE



PERFORM HAND HYGIENE BETWEEN STEPS IF HANDS
BECOME CONTAMINATED AND IMMEDIATELY AFTER
REMOVING ALL PPE



Department
of Health

PPE Doffing Video

SARS-CoV-2 Testing for COVID-19

Alternative Specimen Collection Sites - COVID-19 Testing

- For patients who do not require clinical care in a healthcare setting
- Facilitate collection of samples in a setting that maintains the safety of the staff and other patients, allows the patient ease of access to specimen collection, and relieves the burden on healthcare facilities
 - The [NYSDOH alternative specimen collections sites](#) are available in areas with significant community transmission, with plans for expansion.
 - Call NYSDOH COVID-19 Hotline (888-364-3065) or [LHD](#) for information on sites in your area or check public health website(s) for information on local testing options
 - Additionally, some area health systems and practices may choose to set up their own alternative specimen collection sites to serve their patient population and community.

Alternative Specimen Collection Sites - COVID-19 Testing

- **Expand sites**
 - NY Metropolitan Region
 - Upstate
 - Increase testing in minority communities

Available Molecular Assays

www.fda.gov/medical-devices/emergency-situations-medical-devices/emergency-use-authorizations#covid19ivd

- There are **33** PCR-based assays for SARS-CoV-2 that have been approved under the FDA's EUA process
- The majority of these are assays that can be used in a high-complexity laboratory
- Three are waived assays
- There are many supply chain issues for reagents

Available serology assays

<https://www.fda.gov/medical-devices/emergency-situations-medical-devices/faqs-diagnostic-testing-sars-cov-2>

- Antibody-based assays are being developed at multiple labs but are not yet widely available
- **Three** assays are FDA approved for use in moderate or high complexity laboratories
- There are over 70 serology assays listed on the FDA website
- **These are NOT FDA reviewed, nor approved.**
- Be aware of these disclaimers if you use these tests
 - This test has not been reviewed by the FDA.
 - Negative results do not rule out SARS-CoV-2 infection, particularly in those who have been in contact with the virus. Follow-up testing with a molecular diagnostic should be considered to rule out infection in these individuals.
 - Results from antibody testing should not be used as the sole basis to diagnose or exclude SARS-CoV-2 infection or to inform infection status.
 - Positive results may be due to past or present infection with non-SARS-CoV-2 coronavirus strains, such as coronavirus HKU1, NL63, OC43, or 229E.

Vaccines During COVID-19

Pediatric Vaccines During COVID-19

- CDC, AAP and AAFP have issued guidance
- Immunization of young children should remain a priority during the COVID-19 pandemic
- If a practice can provide only limited well child care, then healthcare providers should **prioritize newborn care and vaccination of infants and young children through 24 months of age**

Strategies to Safely Give Vaccines During COVID-19

- Pre-screen all patients and caregivers for symptoms of COVID-19
- Separate sick and well patients
 - Limit well visits to early in the clinic day, saving sick visits for the afternoon
 - Use dedicated waiting rooms and clinic spaces for sick visits
 - Collaborate with other providers in the community to identify separate locations for well child visits
 - Consider drive-through immunizations if full well-child care cannot be provided

Adult Vaccines During COVID-19

- CDC and American College of Physicians (ACP) have issued guidance
- Adult immunizations should be postponed during the COVID-19 pandemic except when:
 - An in-person visit must be scheduled for some other purpose and the vaccine can be safely administered during that visit; or
 - An individual patient and their clinician believe that the potential benefit of administering the vaccine now outweighs the risk of exposure to the virus that causes COVID-19.

Vaccines Missed or Postponed Today Should be Caught Up Later

- Recommendations to prioritize certain groups or postpone vaccines for others are not recommendations to cancel or permanently defer vaccines
- Slowing or stopping access to vaccines puts NYS at risk of outbreaks of vaccine-preventable diseases now and in the future
- Plan to recall and catch up patients missing immunizations after the COVID-19 pandemic is over
 - Use NYSIIS, CIR and/or EHR reminder/recall functionalities
 - Assess your practice's immunization coverage and missing immunizations using the AFIX module in NYSIIS

Vaccine Recommendations

- CDC Schedule Changes during the COVID-19 Pandemic:
<https://www.cdc.gov/vaccines/schedules/hcp/schedule-changes.html>
- American Academy of Pediatrics COVID-19 Clinical Guidance Q&A:
<https://services.aap.org/en/pages/covid-19-clinical-guidance-q-a/>
- American Academy of Family Physicians COVID-19: Guidance for Family Physicians on Preventive and Non-urgent Care
https://www.aafp.org/dam/AAFP/documents/patient_care/public_health/AAFP-COVID-Non-Urgent-Care-Statement.pdf
- American College of Physicians Statement on Nonurgent In-Person Medical Care:
https://www.acponline.org/acp_policy/policies/statement_on_non_urgent_in-person_medical_care_2020.pdf



Healthcare Providers – Return to Work

Healthcare Workers (HCW) Return to Work Guidance

- After **exposure to a confirmed or suspected case of COVID-19**, HCWs furloughed
- However, entities may allow HCWs to return to work IF HCWs are asymptomatic AND:
 - Furloughing such HCWs would result in staff shortages that would adversely impact the operation of the healthcare entity
 - Screened before shift and every 12 hours
 - Wear a face mask for 14 days after last exposure
 - Preferentially assigned to lower risk patients, where feasible
 - Self-quarantine when not at work

Healthcare Workers (HCW) Return to Work Guidance

- Healthcare entities may request HCW to return to work after **confirmed or suspected COVID-19 IF:**
 - Furloughing such HCWs would result in staff shortages that would adversely impact the operation of the healthcare entity
 - At least 7 days have passed after illness onset
 - Afebrile for >72 hours without anti-pyretics
 - Other symptoms improving
 - Wear a face mask until 14 days after illness onset, if mild symptoms persist but are improving
 - Preferentially assigned to lower risk patients, where feasible
- HCP who are furloughed due to isolation, or because they do not meet the above conditions for returning to work, **qualify for paid sick leave benefits and their employers can provide them with a letter confirming this**, which can be used to demonstrate eligibility for the benefit.

Community Mitigation

NYS Community Mitigation

- **NY on PAUSE and social distancing are working to flatten the curve**
 - We need to continue to flatten the curve
- **NY on PAUSE extended through May 15th**
 - Schools and non-essential businesses will remain closed
- Governor Cuomo will issue an executive order requiring all people in New York to wear masks or face coverings in public
- An executive order directs employers to provide essential workers with masks free of charge to wear when interacting with the public
- NYS will conduct antibody tests prioritizing frontline workers beginning this week
- Governor Cuomo and several northeast state Governors announced the creation of a multi-state council to restore the economy

Masks for the Public

- Recent studies have shown that a significant portion of individuals infected with the virus are asymptomatic
- Asymptomatic individuals, even if they eventually develop symptoms, can transmit the virus to others before showing symptoms
- This means that the virus can spread between people in close proximity — for example, speaking, coughing, or sneezing — even if those people are not exhibiting symptoms at the time
- Considering this new evidence, members of the public must wear masks or face coverings in public settings, where social distancing measures are difficult to maintain (e.g., grocery stores, pharmacies, public transportation, for hire vehicles)
- Executive order will go into effect on Friday, April 17th

Masks for the Public

- **When wearing a mask or face covering, New Yorkers should:**
 - Make sure that they fit snugly and cover their nose and mouth
 - Be changed frequently and laundered when they are soiled or wet
 - Not become complacent with other protective measures
 - Do not touch the cloth covering or face
 - Continue to be vigilant with thorough and frequent hand washing
 - Soap and water, or alcohol-based hand sanitizer of 60%+ alcohol
 - Practice respiratory etiquette and cover your coughs or sneezes
 - Practice social distancing – even when wearing masks
 - Stay home and help flatten the curve!

If you lost your job or health coverage, or are uninsured, we have you covered



Enroll Today



Individuals & Families

You and your family have many low cost, quality health insurance options available through the Individual Marketplace.

You can quickly compare health plan options and apply for assistance that could lower the cost of your health coverage. You may also qualify for health care coverage from Medicaid or Child Health Plus through the Marketplace. Anyone can apply here.

GET STARTED

Get In-Person Help

Compare Plans and Estimate Cost

Search by Health Plan, Provider, or Facility

Chat Now

1

Create an Account.

2

Tell us about yourself and your family.

3

Choose a health insurance plan.

- New Yorkers without health insurance can apply through NY State of Health through May 15th, 2020
- Must apply within 60 days of losing coverage



Department of Health

Infection Prevention and Control

CDC Infection Prevention and Control Guidance

www.cdc.gov/coronavirus/2019-ncov/hcp/infection-control-recommendations.html

- *Updated April 13, 2020*
- Actively screen everyone for fever and symptoms of COVID-19 before they enter the healthcare facility.
- To address asymptomatic and pre-symptomatic transmission, implement source control for everyone entering a healthcare facility (e.g., healthcare personnel, patients, visitors), regardless of symptoms
 - This action is recommended to help prevent transmission from infected individuals who may or may not have symptoms of COVID-19
 - For visitors and patients, a cloth face covering may be appropriate. If a visitor or patient arrives to the healthcare facility without a cloth face covering, a facemask may be used for source control if supplies are available.
 - Cloth face coverings are not considered PPE because their capability to protect healthcare personnel (HCP) is unknown. Facemasks should be reserved for HCP.

CDC Infection Prevention and Control Guidance

www.cdc.gov/coronavirus/2019-ncov/hcp/infection-control-recommendations.html

- As part of source control efforts, HCP should wear a facemask at all times while they are in the healthcare facility.
- Facemasks are preferred over cloth face coverings for HCP as facemasks offer both source control and protection for the wearer against exposure to splashes/sprays of infectious material.
- **If there are anticipated shortages of facemasks, facemasks should be prioritized for HCP and then for patients with symptoms of COVID-19 (as supply allows).**
- **Cloth face coverings should NOT be worn instead of a respirator or facemask if more than source control is required.**

CDC Infection Prevention and Control Guidance

www.cdc.gov/coronavirus/2019-ncov/hcp/infection-control-recommendations.html

- When scheduling appointments for routine medical care (e.g., annual physical, elective surgery), instruct patients to call ahead and discuss the need to reschedule their appointment if they develop fever or symptoms of COVID-19 on the day they are scheduled to be seen. Advise them that they should put on their own cloth face covering, regardless of symptoms, before entering the facility.

CDC Infection Prevention and Control Guidance

Long Term Care Facilities

- www.cdc.gov/coronavirus/2019-ncov/hcp/long-term-care.html
- Visitor restrictions
- Source control
- Screen all HCP at the beginning of their shift for fever and symptoms of COVID-19
 - **Actively take their temperature*** and document absence of shortness of breath, new or change in cough, sore throat, and muscle aches. If they are ill, have them keep their cloth face covering or facemask on and leave the workplace.
 - *Fever is either measured temperature $\geq 100^{\circ}\text{F}$ or subjective fever
- Hand Hygiene Supplies:
 - Put alcohol-based hand sanitizer with 60-95% alcohol in every resident room (ideally both inside and outside of the room) and other resident care and common areas (e.g., outside dining hall, in therapy gym).
 - Make sure that sinks are well-stocked with soap and paper towels for handwashing.
- Dedicate space in the facility to care for residents with confirmed COVID-19.
 - Assign dedicated HCP to work only in this area of the facility.



NYSDOH Infection Prevention and Control Checklist

Long Term Care Facilities

Version 4/10/2020

The New York State Department of Health (NYSDOH) has identified long term care facilities (LTCFs) to be one of the most vulnerable places for spread of COVID-19. Given the burden of COVID-19 cases in NY, we have noted many introductions of COVID-19 into LTCFs, widespread transmission within some facilities once introduced, and high mortality rates among residents. It is imperative that LTCFs take steps to prevent introduction, recognize staff and residents with possible COVID-19, and minimize transmission within the facility, while keeping staff safe from further illness.

Below is the NYSDOH COVID-19 Infection Prevention and Control (IPC) preparedness checklist. This tool is meant to be a self-assessment and provides LTCFs with all the IPC elements that need to be in place both before and after recognition of a confirmed, suspect, or possible COVID-19 case in the facility. The elements of the checklist are adapted from [CDC guidance to LTCFs](#), [CDC Infection Control Guidance](#) and NYSDOH-issued Health Advisories. This checklist may need to be updated as the situation evolves.

The items on the checklist do not replace clinical judgement and are an adjunct to all available infection prevention and control guidance. Nursing Homes should call their [NYSDOH regional epidemiologist](#) or write to icp@health.ny.gov with questions and for additional guidance.

Nursing Home COVID-19 Preparedness Self-Assessment Checklist

Visitor and non-essential personnel restriction

- ☐ Suspend all visitation, except when essential for resident's medical care or for end of life care.
- ☐ Screen essential visitors for fever and respiratory symptoms upon entry to the facility, provide them with mask, if available, remind them to perform hand hygiene, and restrict them to the room of their family member.
- ☐ Restrict non-essential personnel, including volunteers and non-essential consultants (e.g., barbers), from facility.
- ☐ Post signs at all entrances advising that no visitors may enter the facility.
- ☐ Inform family members about visitor restriction. ([Example letter](#))
- ☐ Provide alternative methods for visitation (e.g., video conferencing).
- ☐ Cancel communal dining and any other activity that brings multiple residents together into the same room without adequate spacing (e.g., physical therapy).
- ☐ Keep residents and families informed about the COVID-19 situation in your facility.

Staff education, monitoring, and assignments

- ☐ Provide ongoing staff education and training about:
 - COVID-19 (e.g., symptoms, how it is transmitted). Resources are available at



Department
of Health

Infection Prevention and Control Guidance:

NYSDOH Updated Visitation Guidance

- **Effective immediately, hospitals must suspend all visitation except for patient support persons, family members or legal representatives of patients in imminent end-of-life situations**
- Hospitals are required to permit a patient support person at the patient bedside for:
 - Patients in labor and delivery
 - Pediatric patients
 - Patients for whom a support person has been determined to be essential to the care of the patient (medically necessary) including patients with intellectual and/or developmental disabilities and patients with cognitive impairments including dementia.
- In these situations, NYSDOH considers one support person at a time as essential to patient care

Infection Prevention and Control Guidance: NYSDOH Updated Visitation Guidance

- **The support person of a patient with confirmed or suspected COVID-19 who has been a close contact of the patient has potentially already been exposed to COVID-19.** These support persons should:
 - Wear a surgical or procedure mask throughout their time in the hospital
 - Practice scrupulous hand hygiene
 - Remain in the patient's room except for entrance and exit from the hospital
 - While in the room, a gown and gloves should be worn to prevent the person's hands or clothes from becoming contaminated.
 - Eye protection should be worn while in the room if available
- Hospital staff must screen the support person for symptoms of COVID-19 or to entering the clinical area and every twelve hours thereafter for the remainder of their presence at the bedside

Convalescent Plasma in Clinical Trials

Convalescent Plasma Therapeutic

- One investigational treatment being explored for COVID-19 is the use of convalescent plasma collected from individuals who have recovered from COVID-19
- Use of convalescent plasma has been studied in outbreaks of other respiratory infections, including the 2003 SARS-CoV-1 epidemic, the 2009-2010 H1N1 influenza virus pandemic, and the 2012 MERS-CoV epidemic
- Although promising, convalescent plasma has not yet been shown to be safe and effective as a treatment for COVID-19
- Therefore, it is essential to study the safety and efficacy of COVID-19 convalescent plasma in clinical trials in severe or critically ill patients
- Because COVID-19 convalescent plasma has not yet been approved for use by FDA, it is regulated as an investigational product
- A healthcare provider must participate in one of the pathways described below.
 - Single Patient Emergency IND: call or email request – response given within 4 hours
 - Expanded patient eligibility criteria using the National Expanded Access Treatment Protocol (Mayo Clinic holds the study – hospitals can join)
 - Full clinical trial: clinical trial proposals are submitted to the FDA for investigational use under the traditional IND regulatory pathway (21 CFR Part 312).
- FDA does not collect COVID-19 convalescent plasma or provide COVID-19 convalescent plasma. Healthcare providers or acute care facilities would instead obtain COVID-19 convalescent plasma from an FDA-registered blood establishment.

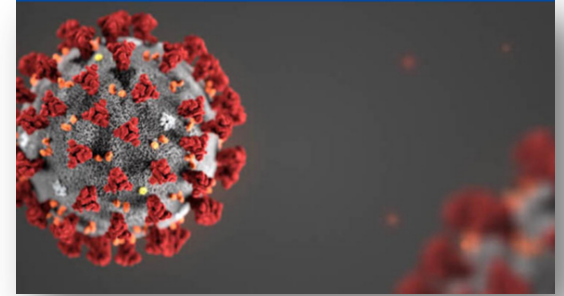
COVID-19 Healthcare System Surge

Marcus Friedrich, MD, MHCM, MBA, FACP
**Chief Medical Officer, Office of Quality and
Patient Safety**
NYSDOH



**Department
of Health**

COVID-19 Healthcare Surge Response



- Telehealth
- Hospital System Surge
- Healthcare Provider Update and Compilation

Telehealth Guidance

- **American College of Physicians Telehealth Resource:**

www.acponline.org/practice-resources/business-resources/health-information-technology/telehealth

- **CDC Outpatient and Ambulatory Care Setting Guidance:**

www.cdc.gov/coronavirus/2019-ncov/hcp/ambulatory-care-settings.html

- **Medicaid:**

www.health.ny.gov/health_care/medicaid/program/update/2020/

COVID-19 Weekly Healthcare Provider Update Compilation:

As of April 15, 2020, 8:00 AM

The information in this compilation is current only as of the above date and time.

Purpose: The purpose of this weekly publication is to provide healthcare providers in New York State with a consolidated update of guidance released by the New York State Department of Health (NYSDOH) related to the COVID-19 pandemic response. This will show only current guidance for any given topic and will be updated to reflect new guidance.

As a reminder, all advisories and informational messages (including webinar invitations) are distributed through the Integrated Health Alerting Network System (IHANS), an application housed on the [Health Commerce System \(HCS\)](#). If you are not receiving IHANS notifications, please work with your site's HCS coordinator. Additional COVID-19 resources may be found on the NYSDOH webpage under [Information for Healthcare Providers](#).

Recordings of COVID-19 [Weekly Healthcare Provider Updates](#) are also available on NYSDOH webpage.

Guidance/Health Advisory Topic	Link(s)	Date
Testing/Specimen Collection	Specimen Collection and Handling to Allow NP and Saliva Specimen	4/1/20
	Wadsworth Specimen Collection, Handling and Transport	4/1/20
	Additional Capacity Guidance (Collection, triage, treatment)	3/19/20
	Testing Protocol	3/19/20
	NEW GUIDANCE: Updated Infectious Disease Requisition Form	4/9/20
	Updated Infectious Disease Requisition Guidance	4/9/20
Infection Control and Personal Protective Equipment	Requests for PPE should go through your county OEM	3/23/20
	REMINDER: Providers should follow the process outlined by the Commissioner of Health for requesting resources through the county and NYS Office of Emergency Management . NYSDOH stresses the importance of making requests no later than 10 days before you expect those supplies to be exhausted.	
	PPE Shortage Guidance	4/2/20
	Optimizing PPE (CDC)	4/3/20
	Infection Control Guidance (CDC)	4/7/20
Quarantine/Isolation	Process for Discontinuation of Home Isolation	3/28/20
	NEW GUIDANCE: Precautionary Quarantine, Mandatory Quarantine, and Isolation	4/20
	Guidance for Local Health Departments highlighting definitions and situations for quarantine and isolation.	4/7/20
Exposure	Contact of a Contact Guidance	3/15/20

HCP Compilation (Week of April 15th)

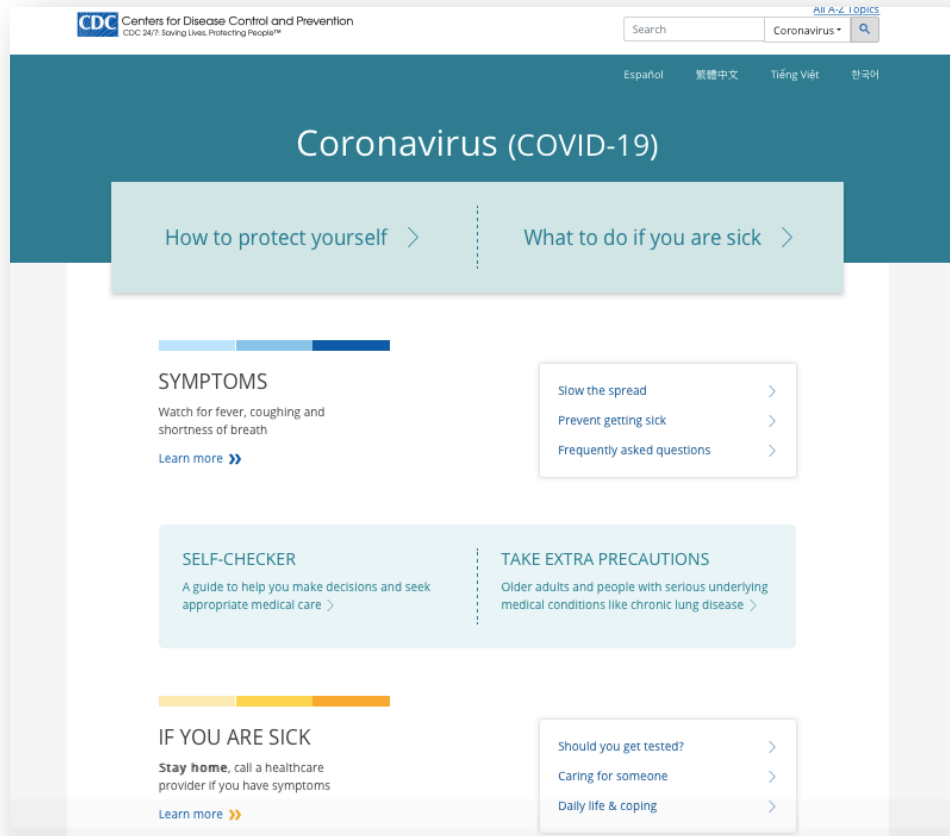
For questions, contact
covidproviderinfo@health.ny.gov



Department
of Health

COVID-19 Resources

CDC COVID Website



www.cdc.gov/coronavirus/2019-ncov/index.html



Department
of Health

Education
Department

NYC DOHMH COVID-19 Webpage

Promoting and Protecting the City's Health

NYC
Health

한국어 ▶ Translate ▼ Text-Size

Home About Our Health Services **Providers** Data Business

Search

Reporting and Services Health Topics Resources Emergency Prep

[By Disease or Condition](#)

Immunizations

Alcohol and Drug Use

Smoking and Tobacco Use

Sexual and Reproductive Health

Children and Adolescents

Healthy Aging

Coronavirus Disease 2019 (COVID-19) — Information for Providers

Daily Syndromic and Case Data Update

The following documents provide information about people confirmed to have COVID-19 in NYC. They will be updated each weekday morning.

The total number of positive cases in the city are updated continuously. This update reflects data as of the previous day at 6 p.m. Due to public health guidance that people with mild illness stay home and not get tested, these data may not reflect the true number of positive COVID-19 cases in NYC and may overrepresent the volume of hospitalized cases.

As of March 18, 6 p.m.:

- [COVID-19 Daily Case Data Summary](#) (PDF)
- [NYC Flu-like Illness Data 2016-Current](#) (PDF)

Department
of HealthEducation
Department

Mental Health Resources



Services News Government Local

Office of Mental Health

About OMH Consumers & Families Behavioral Health Providers Employment

Guidance Documents

As defined in section 202-e of the State Administrative Procedure Act, a guidance document is any guideline, memorandum or similar document, prepared by an agency, that provides general information or guidance to assist regulated parties in complying with any statute, rule or other legal requirement. The term does not include documents that concern only the internal management of the agency, such as a policy that applies only to an OMH operated facility or program.

Current OMH Guidance Documents:

Guidance on COVID-19

- [OMH Psychiatric Center Visitor Restriction Guidance](#) 📄 (3/14/2020)
- [COVID-19 Guidance for Children's Waiver Service Providers](#) 📄 (3/14/2020)
- [DOH Medicaid Updates – Special Editions](#)
- [COVID-19 Guidance for Health Homes](#) 📄 (3/14/2020)
- [Provider Memo – Maintaining Continuity of Operations Plans and Reporting Disruptions in Services](#) 📄 (3/13/2020)
- [Guidance for NYS Behavioral Health Programs](#) 📄 (3/11/2020)
- [Interim Guidance for Cleaning and Disinfection of Public and Private Facilities for COVID-19](#) 📄
- [Interim Guidance for Large Gatherings and Public Spaces During the COVID-19 Outbreak](#) 📄
- [OMH Guidance for Managing Stress and Anxiety During the COVID-19 Outbreak](#) 📄

COVID-19 Telemental Health Guidance

- [Supplemental Guidance – Use of Telehealth for People Served by OMH Licensed or Designated Programs Affected by the Disaster Emergency](#) 📄 (REVISED – 3/17/2020)
- [Self-Attestation of Compliance to Offer Telemental Health Services](#) 📄 (REVISED - 3/13/2020)
- [DOH Medicaid Update Special Edition: COVID-19 Telephonic Communication Services](#) 📄
- [OASAS Telepractice Waiver Update](#) 📄
- [Interim Guidance Regarding the Delivery of Services Through the Use of Telehealth Modalities in Facilities Certified or Operated by OPWDD](#) 📄
- [Use of Telemental Health for People Affected by the Disaster Emergency](#) 📄 (3/11/2020)

- For everyone
- For individuals receiving mental health services
- For parents
- For caregivers of older adults
- For mental health providers

March 16, 2020

Office of
Mental Health

Feeling Stressed About Coronavirus (COVID-19)?

Managing Anxiety in an Anxiety-Provoking Situation

The outbreak of COVID-19 around the world has led to the spread of fear and panic for individuals and communities. In addition to following physical precautions guidelines, individuals should be taking care of their psychological well-being.

This guide includes tips for the following populations:

- For Everyone
- For Individuals Receiving Mental Health Services
- For Parents, Including Parents of Children with Pre-Existing Anxiety Disorders
- For Caregivers of Older Adults
- For Mental Health Providers

For Everyone:

- Reduce anxiety by reducing risk. Ways to reduce risk include practicing good hygiene (e.g.

Department
of HealthEducation
Department

Mental Health Resources

- **NYS Mental Health Helpline**

1-844-863-9314

- The helpline is staffed by specially trained volunteers, including mental health professionals, who have received training in crisis counseling related to mental health consequences of infectious disease outbreaks, typical stress reactions, anxiety management, coping skills, and telephonic counseling





Medical Matters 2020

Sponsored by the Medical Society of the State of New York
COVID-19 for Office-Based Physicians: How to
Handle Surge & Psychological First Aid

Live Webinar

Wednesday, April 29, 2020 @ 7:30am



Faculty: William Valenti, MD & Craig Katz, MD

Educational Objectives:

- ◆ Explore the role of office-based physicians during the COVID-19 pandemic
- ◆ Describe surge preparedness procedures for infectious disease outbreaks
- ◆ Identify wellness and resiliency strategies to use during infectious outbreaks

To register, please: [Click Here](#)

For more information, contact:

Melissa Hoffman at mhoffman@mssny.org or call (518) 465-8085

Funding provided by the New York State Department of Health

The Medical Society of the State of New York is accredited by the Accreditation Council for Continuing Medical Education (ACCME) to provide continuing medical education for physicians.

The Medical Society of the State of New York designates this live activity for a maximum of 1.0 **AMA PRA Category 1 credits™**. Physicians should claim only the credit commensurate with the extent of their participation in the activity.



Department
of Health

Education
Department

NYSDOH COVID-19 Website

[Services](#)[News](#)[Government](#)[Local](#)[Q Search](#)[Department of Health](#)[Individuals/Families](#)[Providers/Professionals](#)[Health Facilities](#)[Have a Question? Call the Novel Coronavirus Hotline 24/7 at 1-888-364-3065](#)[Information for Providers](#)

Novel Coronavirus (COVID-19)

Last Updated: March 17, 2020 at 8:15 PM

Protect Yourself and Your Family

Stay home and Keep a Safe Distance from others in public. It's the only way to help slow the spread of Coronavirus.

[▶ WATCH VIDEO](#)[SYMPTOMS](#)



Symptoms

The 2019 novel coronavirus may cause mild to severe respiratory symptoms.

▶ WHAT TO LOOK FOR



COVID-19 Testing

Learn more about testing protocol now that the FDA has approved New York to begin its own testing.

OVERVIEW ▶

MOBILE TESTING ▶

PROTOCOL FOR TESTING ▶

▶ LEARN MORE



Know Your Rights

The health and safety of New Yorkers is the top priority, co-pays for telehealth visits have been waived.

TESTING ▶

INSURANCE ▶

UNEMPLOYMENT ▶

▶ LEARN MORE

PROTECTING THE PUBLIC HEALTH OF ALL NEW YORKERS

Mandatory and
Precautionary Quarantine

Mass Gatherings

Healthcare Providers

Nursing Homes

Schools

Childcare Providers

Employees & Employers

Insurance

Voting

International Travel

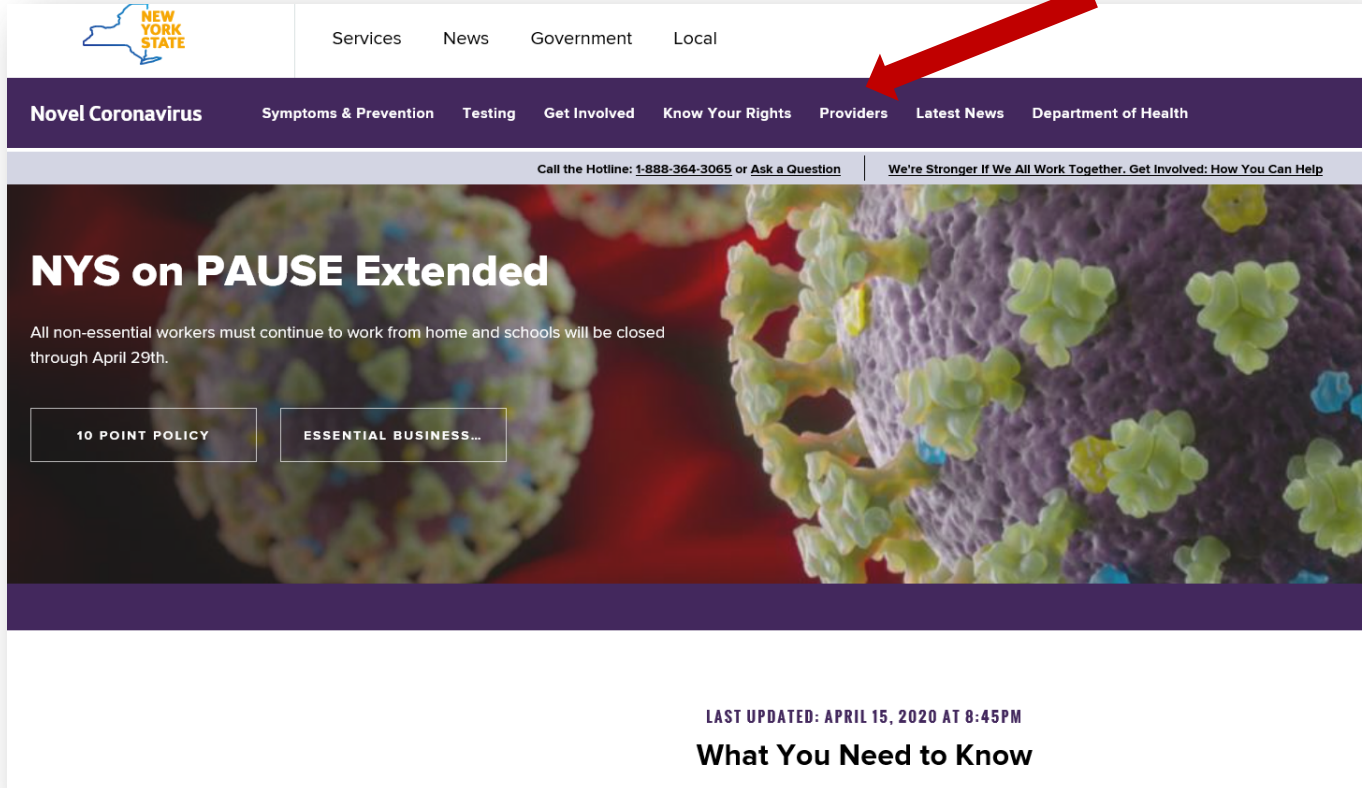
Cyber Security

Price Gouging




Department
of Health

NYSDOH COVID-19 Website



The screenshot shows the NYSDOH COVID-19 website. At the top left is the New York State logo. A navigation bar contains links for Services, News, Government, and Local. Below this is a dark purple header with a red arrow pointing to the 'Providers' link. The header also includes 'Novel Coronavirus', 'Symptoms & Prevention', 'Testing', 'Get Involved', 'Know Your Rights', 'Latest News', and 'Department of Health'. A light purple bar below the header contains the text 'Call the Hotline: 1-888-364-3065 or Ask a Question' and 'We're Stronger If We All Work Together. Get Involved: How You Can Help'. The main content area features a large image of a virus particle with the headline 'NYS on PAUSE Extended'. Below the headline is the text 'All non-essential workers must continue to work from home and schools will be closed through April 29th.' and two buttons: '10 POINT POLICY' and 'ESSENTIAL BUSINESS...'. At the bottom, it says 'LAST UPDATED: APRIL 15, 2020 AT 8:45PM' and 'What You Need to Know'.

 Services News Government Local

Novel Coronavirus Symptoms & Prevention Testing Get Involved Know Your Rights **Providers** Latest News Department of Health

Call the Hotline: [1-888-364-3065](tel:1-888-364-3065) or [Ask a Question](#) | We're Stronger If We All Work Together. Get Involved: [How You Can Help](#)

NYS on PAUSE Extended

All non-essential workers must continue to work from home and schools will be closed through April 29th.

[10 POINT POLICY](#) [ESSENTIAL BUSINESS...](#)

LAST UPDATED: APRIL 15, 2020 AT 8:45PM

What You Need to Know

FILTER

- Health Advisories
- Webinars
- Printable Materials
- Guidance

ATTENTION ALL PATIENTS



If you have

fever



cough



trouble
breathing



- Call this number _____.
- Tell them your symptoms.
- Ask where you should go and what you should do.
- Put on a mask before going inside.

ATTENTION ALL VISITORS



**NO VISITORS
ARE ALLOWED
AT THIS TIME**

If you feel there is an urgent need for visitation,
please contact _____.

DO NOT VISIT



Novel Coronavirus



Get Involved: How You Can Help

Support New York's response. New York State is doing all it can to keep New Yorkers safe and stop the spread of COVID-19. But we're stronger if we all work together.

[NYS COVID Get Involved How You Can Help](#)



Department
of Health

THE STATE IS TAKING MEASURES TO CREATE A RESERVE WORKFORCE

Seeking Qualified Health Professionals

Health, Mental Health, and Related Professionals

With your help, New York State is working to protect our residents and strengthen our public health system. We are looking for qualified health, mental health, and related professionals who are interested in supporting the state's response.

[COMPLETE THE SURVEY](#)

School of Public Health, School of Medicine, or School of Nursing Administrators

We appreciate your commitment to the health and safety of all New Yorkers and look forward to building on our partnership. We are looking for qualified individuals who are interested in supporting the state's response.

[COMPLETE THE SURVEY](#)

[NYS COVID Get Involved How You Can Help](#)



**Department
of Health**

Questions or Concerns

- Call the local health department www.health.ny.gov/contact/contact_information/
- In New York City: Notify the NYC DOHMH provider access line (PAL)
 - 1-866-NYC-DOH1 or 1-866-692-3641 (works 24 hours/day x 7 days/week)
- Providers who are unable to reach the LHD can contact the NYSDOH Bureau of Communicable Disease Control at **518-473-4439** during business hours or the NYSDOH Public Health Duty Officer at **1-866-881-2809** evenings, weekends, and holidays

QUESTIONS ?

THANK YOU!

New York City THANKS Healthcare Workers!

Courtesy of Rebecca Goldberg



Department
of Health